APN 003-033-06

Grantee's address: James B. Porth and Susan R. Medwied 32 Santa Teresa Rancho Santa Margarita, CA 92688 BOOK 403 PAGE 223
OFFICIAL RECORDS
RECORDED AT THE RECOVEST OF
SUGAN Medwird
2005 JAN 14 PM 2: 18

EUREKA COUNTY, NEVADA M.H. RESALEATI, RECORDER FILE NO. FEE\$ 5

194995

GRANT, BARGAIN AND SALE DEED

THIS INDENTURE, made the Arthory day of December, 2004, by and between Carol H. Porth, trustee of the James W. Porth and Carol H. Porth living trust, party of the first part and hereinafter referred to as `Grantor'', and James B. Porth and Susan R. Medwied, trustees UDT dated 7-20-94 FBO James B. Porth and Susan R. Medwied trust, parties of the second part and hereinafter referred to as `Grantees'',

WITNESSETH:

That said Grantor, for and in consideration of the sum of ten dollars (\$10.00) lawful money of the United States of America, and other good and valuable considerations, the receipt of which is hereby acknowledged, does hereby grant, bargain and sell unto said Grantees, and to their heirs and assigns forever, the following described lots, pieces or parcels of land situate, lying and being in the County of Eureka, State of Nevada, and bound and particularly described as follows:

Lot 7 of Block 13 of CRESCENT VALLEY RANCH & FRAMS, Unit no. 3, as per map recorded in said County as File No. 34551

and commonly known as: 512 Stone Lane

TOGETHER WITH ALL AND SINGULAR, the tenements, hereditaments and appurtenances thereunto belonging and in anywise appertaining, and the reversion and reversions, remainder and remainders, rents, issues and profits thereof.

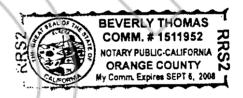
TO HAVE AND TO HOLD, ALL AND SINGULAR, the said premises together with the appurtenances, unto the said Grantees and to their heirs, successors and assigns forever.

IN WITNESS WHEREOF, the said Grantor has here unto set her hand the day and year first above written.

Care N. Porth TTE ?

CAROL H. PORTH, Trustee

STATE OF CALIFORNIA }
COUNTY OF ORANGE }



On this <u>29</u> day of December, 2004, personally appeared before me, a Notary Public, Carol H. Porth, personally known or proved to me to be the person whose name is subscribed to the above instrument and who acknowledged that she executed the instrument.

Notary Public

DECLARATION OF VALUE

. Account Depart Number (a)	Documentinstrumenti: 194995, 194996
1. Assessor Parcel Number (s) a) 002 - 057 - 03	Book: 40.3 Page: 223' - 226
b) 003 - 033 - 06	Date of Recording:
- c)	Notes:
d)	
•	
2. Type of Property:	
a) Vacant Land b) Single Fam R c) Condo/Tvinhse d) 2-4 Plex	es. \ \ \
e) Apt. Sidg. f) Comm'l/Ind't	\ \
g) Agricultural h) Mobile Home	
7 Odda	
3. Total Value/Sales Price of Property:	scompined total 6,200
Deed in Lieu of Foreclosure Only (value of property)	\$ N/A
Transfer Tax Value:	\$ 3.100
Real Property Transfer Tax Due:	\$ 13,65
4. If Everation Claimed:	
 If Exemption Claimed: a. Transfer Tax Exemption, per NRS 375.090, Section: 	
b. Explain Reason for Exemption: 61 aux 21	11 2 1 2 2 2 2 2 2 2 2 2 2
Saughter-Wind. (5000 exem	
Partial Interest: Percentage being transferred:	100 %
The understand declared and debaggledens under son	office of and the control of the NDC 275 055
The undersigned declares and acknowledges, under pen-	
and NRS 375.110, that the information provided is correct belief, and can be supported by documentation if called u	
provided herein. Furthermore, the disallowance of any classical states of the control of the con	
of additional tax due, may result in a penalty of 10% of the	
of additional tax doe, they result in a penalty of 10% of the	e tax due plus interest at 1% per month.
Pursuant to NRS 375,030, the Buyer and Seller shall b	e jointly and severally liable for any
additional amount owed.	,,
Signature Answ Mike	Capacity Bussel
Signature	Capacity Buyer Capacity
Olghero. O	oapacity
SELLER (GRANTOR) INFORMATION BUY	YER (GRANTEE) INFORMATION
(REQUIRED)	(REQUIRED)
Print Name: CAROL H. PORTH Print I	
Address: Addre	
City: RSM City:	RSM
State: CA Zip: 92688 State:	et Zip: 92658
COMPANY/PERSON REQUESTING RECORDIN	<u>IG</u>
(REQUIRED IF NOT THE SELLER OR BUYER)	
Print Name:	Escrow# N/4
Address:	
City: State:	Zip:

(AS A PUBLIC RECORD THIS FORM MAY BE RECORDED)